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Total contributions this event

Event Date	<u>10/12/10</u>	
Page	1	w-

Page Total \$ 450.00

Statement of Contributions Received at a Social or Fundraising Event

	Prescribed by Se	ecretary of State 3/05							
Name of Committee in Full									
Citzens for Quality Schools	3	-	In .						
Full Name of Contributor					Registration Number, if PAC				
Contributions of \$25 or Less Street Address Employer/Occupation/Labor Organization*					M D Y Amount				
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full Name of Contributor			Registra	uon Nun	nber, if PA	AC			
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City	State	Zip Code	Form(Ca	ish,Chec	k.eic)				
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Street Address	Employer Occu	Employer Occupation/Labor Organization*		D	Y	Amount	·		
	State	Zip Code	Form(Ca	ish,Chec	k.etc)				
City		i			•				

Total expenditures this event